

Stanley Hose Company
Fire Department

Application Packet



STANLEYHOSE.COM

Stanley Hose Co. Applicant,

Thank you for considering membership into the Stanley Hose Company.

- You must complete all the information in this application packet including:

Application Form

Three Reference Sheets

Complete the sign off sheet for a criminal, arson, and driving record check, including a local, state, and national sex offender registries check. The Chautauqua County Sheriff's Department will conduct this background check.

If transferring from another department, you must provide a letter from that department's chief stating that you left in good standing. Additionally, you must provide the Stanley Hose Company's Chief with your previous training records.

The Board of Directors reserves the right to contact your references to gain a better understanding of your character.

The Board of Directors will share the information collected in regards to your membership application to the current members of the Stanley Hose Company at a monthly meeting and they will then vote on your request to become a member.

If your request to become a member is accepted by the membership, the Chief of the Stanley Hose Company will set up a meeting to inform you of the requirements to be a member of the Stanley Hose Company Fire Department.

Stanley Hose Co.
Membership Application

Name: _____

Age: _____

Address: _____

DOB: _____

Home Phone # _____

Work Phone # _____

Employed by: _____

Emergency Contact:

Name: _____ **Relationship:** _____

Address: _____

Home Phone # _____ **Work Phone #** _____

Past Medical History/Allergies:

Previous Fire Experience: Yes _____ No _____

If yes, complete the following.

Name of Department: _____

Length of Service: _____ **Severance Date:** _____

Reason for Leaving: _____

Have you been charged or convicted of any crime: Yes_____ No_____

If you have been charged/convicted of a crime and still would like to be considered for membership, explain the circumstances surrounding your charge/conviction.

In signing this I assure that all the information I am providing in this packet is accurate.

Applicant's Signature

Stanley Hose Co. Fire Department

Membership Application

Reference

You will have to have three of these references completed. A current or former employer must fill one of the references out. Any non-relatives may complete the other two references.

References Name: _____ **Date:** _____

Relationship to applicant: _____

Address: _____

Phone Number: _____ **Years you've known applicant:** _____

Write a brief explanation as to why you think this applicant should be accepted into the Stanley Hose Co. Fire Department.

***I, without reservation, recommend this applicant to the Stanley Hose Co. Fire Dept.**

Reference's Signature

Stanley Hose Co. Fire Department

Membership Application

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Stanley Hose Co. Fire Department

Membership Application

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